



RECORD OF COMPLAINT FORM

READ THE ATTACHED BROCHURE *BEFORE* COMPLETING YOUR COMPLAINT. NOT ALL COMPLAINTS ARE INVESTIGATED

Instructions: Type or print the following information for the person filing the complaint and the Business/Seller the complaint is against.

Name — First name, middle initial(s) and last name
Address — Street, town/city and zip code
Telephone numbers — Area code and number(s) where you can be called during the day and evening

I. COMPLAINANT (Person Filing Complaint)

NAME (FIRST, MIDDLE INITIAL(S), LAST)

STREET OR P. O. BOX		APT. NUMBER	DRIVER LICENSE OR IDENTIFICATION NUMBER	
CITY	STATE		ZIP CODE	
DAY TELEPHONE NUMBER		EVENING TELEPHONE NUMBER		
SIGNATURE		DATE		

II. BUSINESS/SELLER COMPLAINT IS AGAINST

NAME (FIRST, MIDDLE INITIAL(S), LAST)

STREET OR P. O. BOX		TELEPHONE NUMBER	
CITY	STATE	ZIP CODE	
DID YOU SEND A PREVIOUS COMPLAINT TO DMV AGAINST THIS BUSINESS/SELLER?		IF YES, WHEN?	

May we show a copy of your complaint to the business/seller? ☐ Yes ☐ No

If the transaction occurred at a location different than the business address above, please list it here.

Address:

III. VEHICLE INFORMATION Write the license plate number and vehicle identification number as they are shown on the contract between the buyer and seller. Enter the purchase date (same as when the contract was signed).

YEAR	MAKE	MODEL	LICENSE PLATE NUMBER	STATE
VEHICLE IDENTIFICATION NUMBER (VIN)			PURCHASE DATE	

IV. COMPLAINT Explain the details of this complaint.

IV. COMPLAINT (continued)**IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER**

V. MAILING DIRECTIONS

To help explain the details of your complaint, **YOU MUST SUPPLY PHOTOCOPIES OF THOSE DOCUMENTS RELATED TO YOUR COMPLAINT.** (Include: contracts, warranties, receipts, cancelled checks, repair orders, photographs, letters)

—DO NOT SEND ORIGINAL DOCUMENTS—**PHOTOCOPY THE COMPLETED COMPLAINT. KEEP A COPY FOR YOUR RECORDS.**

- Mail the complaint and copies of supporting documents to the Bureau of Investigations District Office closest to where the incident took place (see list below).

**FAILURE TO SEND SUPPORTING DOCUMENTS
MAY DELAY RESPONSE TO YOUR COMPLAINT**
VI. DEPARTMENT OF MOTOR VEHICLES BUREAU OF INVESTIGATIONS DISTRICT OFFICES

CITY	STREET ADDRESS	ZIP CODE
Anaheim	2450 East Lincoln Avenue, #120	92806-4990
Artesia	17100 South Pioneer Boulevard, #320	90701-2700
Bakersfield	7000 Schirra Court	93313-2117
Campbell	440 Darryl Drive	95008-0939
Carmichael	5209 North Avenue	95608-3298
Chico	520 Cohasset Road, #7	95926-2260
Chula Vista	30 North Glover Avenue	91910-1040
Los Angeles (Culver City)	11400 West Washington	90066-6089
El Monte	9537 Telstar Avenue, #102	91731-2912
Fresno	1551 East Shaw, #101	93710-8007
Hayward	1314 West Winton Avenue	94545-1408
Inglewood	621 North La Brea Avenue	90302-3099
Irvine	18231 McDermott West, #100	92614-6720
La Mesa	7777 Alvarado Road #616	91941-2953
Los Angeles (Lincoln Park)	3529 North Mission Road	90031-3120
Los Angeles	3615 South Hope Street	90007-4370
Rancho Cucamonga	8629 Hellman Avenue	91730-4455
Riverside	6296 Rivercrest Drive, #A	92507-0738
Roseville	151 North Sunrise Avenue, #1006	95661-2930
Sacramento	4700 Broadway	95820-1501
San Diego	4375 Derrick Drive	92117-4990
San Francisco	5 Thomas Mellon Circle, #168	94134-2594
San Bernardino	1845 Business Center Drive, #210	92408-3447
Santa Rosa	2570 Corby Avenue	95407-6005
Stockton	510 East Magnolia, #3	95202-2314
Vallejo	200 Couch Street	94590-2904
Ventura	1732 Palma Drive, #202	93003-5717
West Covina	800 South Glendora Avenue, Rm-100	91790-4201
Winnetka	20725 Sherman Way	91306-2704